PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2000

Application or Docket Number

09755826

CLAIMS AS FILED - PART I			nn 2)	SMALI TYPE	ENTITY	OB	OTHER TH		
TOTAL CLAIMS			A STATE OF THE STA	RAT	E FEE]	RATE	FEE	
FOR	NUMBER FIL	ED NUMBE	R EXTRA	BASIC	FEE 355.00	OR	BASIC FEE	710.00	
TOTAL CHARGEABLE CLAIM	S 20 minus	20=		-X\$ 9		OR	X\$18=#		
INDEPENDENT CLAIMS	2 minu	s 3 =	10 May 10 10 10 10 10 10 10 10 10 10 10 10 10	X40		畿	X80=		
MULTIPLE DEPENDENT CLAI	M PRESENT	The same with the same in the last	324 J. J. J.	A40	- Arianga	OR	∧o∪=		
				+135		OR	.+270=		
* If the difference in column		ter version	olumn 2	TOTA	Links	OR	TOTAL	b fixed	
CLAIMS A. (Column	S AMENDED -	PART II (Column 2)	(Caluma a)	SMA	LL ENTITY	OR	OTHER SMALL	WINGS CHILL BUT SHE	
57052 SEESTS AND VIVO	经 联	HIGHEST NUMBER	PRESENT		ADDI	7		ADDI-	
AFTER		PREVIOUSLY	EXTRA	RAT	E TIONAL		RATE	TIONAL FEE	
Total	Minus			X\$ 9	25.27	l Ion	X\$18=		
REMAININ REMAININ AMENDME AMENDME AMENDME Independent :	Minus		S. July S.	X40		i.a.i	X80=.2		
FIRST PRESENTATION O	F MULTIPLE DEPE	NDENT CLAIM		M (40)		OR	NOU-64		
		organismos Presidentismos	in edji ne st Citi Willes ka	+135		OR	. +270≝	No.	
				ADDIT.		OR	TOTAL ADDIT: FEE	14.5	
(Column		(Column 2)	(Column 3)				707.54.54		
REMAININ AFTER AMENDME	iG -	NUMBER PREVIOUSLY	PRESENT	RAT	ADDI-1	a property and	RATE	ADDI- TIONAL	
AMENDME	NT C	PAID FOR	Zvivišoše.	in in the lite	FEE			FEE	
For Total	Minus			X\$.9		OR	X\$18≡		
Independent :	Minus E MUI TIPLE DEPE	NDENT CLAIM		× X40		OR	∗X80≕.	g san san	
				+135		OR	+270=^	A)7-444	
				TO ADDIT, F		٦,,	TOTAL ADDIT: FEE	15 ST 24 ST	
(Column	1)	(Column 2)	(Column 3)	AUUII I	ed elektrik Arkanisti	中的	ADDII: FEEI 建一定的基础	Morros Sortista	
	Cortica	HIGHEST NUMBER	PRESENT		.aDDl≅]		/ADDI	
AFTER AMENDME		PREVIOUSLY PAID FOR	EXTRA	RAT	E TIONAL FEE		RATE	TIONAL FEE	
Total	Minus	**	ingles, jewer w	X\$ 9	the factions	OR	X\$18=	经 对 哪	
CLAIMS REMAININ AFTER AMENDME Total Independent Total	1	***	=	X40		1	X80=	3° 30-3	
FIRST PRESENTATION O	F MULTIPLE DEPE	NDENT CLAIM			_	OR		* ***	
If the entry in column 1 is less the		n 2. write "0" in col	umn 3.	+135		OR	+270=	#.4.M	
** If the "Highest Number Previous"	sly Paid For" IN THIS	SPACE is less that	n 20, enter "20."	TO ADDIT. F		OR	TOTAL ADDIT. FEE	L	
The "Highest Number Previous				found in the	e appropriate be	ox in co	lumn 1.		

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CLAIMS AS FILED - PART I (Column 1) (Column 2)									SMALL ENTITY TYPE			THAN ENITITY
T	OTAL CLAIMS							RATE	FEE	7	RATE	FEE
FOR			NUMBER FILED		NUMBER EXTRA			BASIC FEE	370.00	OR	BASIC FEE	740.00
TOTAL CHARGEABLE CLAIMS			mi	nuș 20=	*			X\$ 9=		OR	X\$18=	
INI	DEPENDENT C	LÄIMS	m	inus 3 =	*			X42=		OR	X84=	
М	JLTIPLE DEPE			 		``						
* [f the difference	in column 1 is	r "0" in d	column 2	•	+140=	ļ	OR	+280 =			
* If the difference in column 1 is less than zero, enter "0" in column 2 CLAIMS AS AMENDED - PART II								TOTAL	L	OR	TOTAL OTHER	THAN
		(Column 1)		(Colur	mn 2) ·	(Column 3)	_	SMALL	ENTITY	OR	SMALL	
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIC PAID	BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
NDN	Total	- 20	Minus	* 6	20	=		X\$ 9=		OR	X\$18=	
AME	Independent	* J-	Minus	***	3	= \		X42=		OR	X84=	
	FIRST PRESE	NTATION OF MU	JUIPLE DEI	ZENDENT	CLAIM		j	+140=		OR	+280=	
			, *			. •		TOTAL			TOTAL ADDIT. FEE	
		(Column 1)		(Colun	nn 2)	(Column 3)	_	ADDIT FEE	· · · · · · · · · · · · · · · · · · ·	. ,	ADDIT. FEEL	
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUMI PREVIC PAID	BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
AME.	Independent	*	Minus	***		=		X42=		OR	X84=	
	FIRST PRESE	NTATION OF MU	ILTIPLE DEF	PENDENT	CLAIM		ן נ	+140=		Ì	+280=	
		ı					i	TOTAL		OR L	TOTAL	
	· .	(Only man 4)	4	(O - l	0\	(0.1		ADDIT. FEE L		OH A	ADDIT. FEE	
		(Column_1) CLAIMS		—(Colun HIGH	EST	(Column 3)	1 1	T	ADDI-		1	ADDI-
AMENDMENT C		REMAINING AFTER AMENDMENT		NUME PREVIO PAID F	USLY	PRESENT EXTRA		RATE	TIONAL FEE		RATE	TIONAL FEE
NDN	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
AME	Independent	*	Minus	***		=		. X42=		OR	X84=	
	FIRST PRESE	NTATION OF ML	LTIPLE DEF	ENDENT	CLAIM		l	+140=		OR	+280=	
		nn 1 is less than th					L	TOTAL) 	TOTAL	
***	If the "Highest Nur	mber Previously Pa mber Previously Pa ber Previously Paic	id For" IN THI	S SPACE is	less than	n 3, enter "3."		ADDIT, FEE L			DDIT. FEE L. mn 1	
			- (1010101		.,				, ====		•	i

PATENT APPLICATION FEE DETERMINATION RECORD

Effective January 1, 2003

Application or Docket Number

69/755 826

		CLAIMS A	S FILED (Colum			umn 2)		SMALL E	NTITY			RTHAN
Ť	OTAL CLAIMS	3	T COMMITTEE			(Colonia 2)		RATE		OR T		ENTITY
F	DR		NUMBER	REILED	NI IM	BER EXTRA		BASIC FE	FEE		RATE	FEE
<u> </u> -		ARI E CLAIMS	 		1 TOWN	DEIT EN INA	•	<u> </u>	₹ \$375	OR	BASIC FEE	\$750
TOTAL CHARGEABLE CLAIMS			l mi	minus 20= *				X\$ 9=	1	OR	X\$18=	
—	DEPENDENT C	· ·		minus 3 = 1				X42=	İ	OR	X84=	
<u> </u>		NDENT CLAIM F						+140=		OR	+280=	÷.
* [1	the difference	e in column 1 is	less than z	ess than zero, enter "0" in column 2				TOTAL		OR	TOTAL	
	120					OTHER	THAN					
_		(Column 1)		(Colun		(Column 3)	1 ,	SMALL		OR	SMALL	,
AMENDMENTA		REMAINING AFTER AMENDMENT		NUME PREVIO PAID F	BER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
NDN	Total	. 20	Minus	**	20	=		X\$ 9=		OR	X\$18=	
AME	Independent FIRST PRESE	* 2 ENTATION OF M	Minus ULTIPLE DE	*** PENDENT	S CLAIM	=		X42=		OR	X84=	Kanag
	4				- · · · · ·	₩ .	'	+140=		OR	+280=	
	• .	•		•			L	TOTAL		ا را	TOTAL	
٠.		(Column 1)		. (Colum	nn 2)	(Column 3)	F	ADDIT. FEE:	<u> </u>	1 ~. ",	ADDIT. FEE	"
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUMB PREVIO PAID F	EST BER USLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
Ñ	Total	*	Minus	**	-	=		X\$ 9=		OR	X\$18=	
AME	Independent	<u> </u>	Minus	***		='		X42=			X84=	•
Ù	FIRST PRESE	NTATION OF MU	JLTIPLE DEF	PENDENT	CLAIM					OR		
				•			L	+140=		OR	+280=	
•							A	TOTAL DDIT. FEE		OR A	TOTAL ODIT. FEE	
		(Column 1)	Manual glassics	(Colum		(Column 3)	s.	٠.				
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUMB PREVIOU PAID F	ER USLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	,
ME	Independent	*	Minus	***		=	1	X42=		ŀ	X84=	
	FIRST PRESE	NTATION OF MU	JLTIPLE DEP	PENDENT	CLAIM		-	/\74-		OR	A04= .	
+ 14	the entry in and	mm 4 fin last 10 - 10			0.11			+140=		OR	+280=	
It	the "Highest Nur	nn.1 is less than th nber Previously Pa	id For" IN THIS	S SPACE is I	less than	20. enter "20."	ΑE	TOTAL DDIT. FEE		OR A	TOTAL DDIT: FEE	
T	nie Highest Num he "Highest Num	mber Previously Pa ber Previously Paid	id For" IN THIS For" (Total or	S SPACE is I Independen	less than it) is the l	i 3, enter "3." highest number			opriate box			